

Substitute for form 1449/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT(S)</b>	<b>Complete if Known</b>	
	Application Number	<del>Utility of 10/496,752</del> 10/821,760
	Filing Date	Herewith 4-9-04
	First Named Inventor	Kaplan
	Art Unit	Unknown
Examiner Name	Not Yet Assigned	
Sheet 1 of 4	Attorney Docket No.	D/A3286 (XERZ 2 00614)

**U.S. PATENT DOCUMENTS**

Examiner Initials*	Cite No.	Document No. Number-Kind Code (if known)	Publication/Issue Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
MC	AA	US-3,002,927	10-03-1961	Awe et al.	
	AB	US-3,590,000	06-29-1971	Palermi et al.	
	AC	US-3,731,358	05-08-1973	Artl	
	AD	US-4,011,362	03-08-1977	Stewart	
	AE	US-4,029,827	06-14-1977	Imperial et al.	
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**FOREIGN PATENT DOCUMENTS**

Examiner Initials*	Cite No.	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T
		Country Code-Number Kind Code (if known)				
	AM					<input type="checkbox"/>
	AN					<input type="checkbox"/>
	AO					<input type="checkbox"/>
	AP					<input type="checkbox"/>

**OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS**

Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume/issue number(s), publisher, city and/or country where published	T
	AQ		<input type="checkbox"/>
	AR		<input type="checkbox"/>
	AS		<input type="checkbox"/>
	AT		<input type="checkbox"/>
	AU		<input type="checkbox"/>
	AV		<input type="checkbox"/>

Examiner Signature	/Mark Chapman/	Date Considered	12/29/2006
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